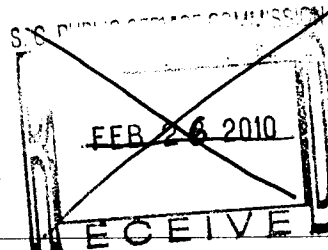


222368 2010 96-E Return 2/26/10

Public Service Commission of South Carolina
101 Executive Center Dr., Suite 100
Columbia, SC 29210



Phone: 803-896-5100
Fax: 803-896-5199
www.psc.sc.gov

Complaint Form

Print

Date: 2-24-10

Complainant or Legal Representative Information:

* Required Fields

Name * Doris E. Taylor

Firm (if applicable)

Mailing Address * 113 Brookland Circle

City, State Zip * Columbia, SC 29204

Phone *

E-mail *

Name of Utility Involved in Complaint: * SCE & G

NOTE: If AT&T is the utility involved, please complete the attachment located at the end of this form.

Type of Complaint (check appropriate box below.) *

- | | | | |
|---------------------------------------------------------------|------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|
| <input checked="" type="checkbox"/> Billing Error/Adjustments | <input type="checkbox"/> Deposits and Credit Establishment | <input type="checkbox"/> Wrong Rate | <input type="checkbox"/> Refusal to Connect Service |
| <input type="checkbox"/> Disconnection of Service | <input type="checkbox"/> Payment Arrangements | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Line Extension Issue |
| <input type="checkbox"/> Service Issue | <input type="checkbox"/> Meter Issue | | |
| <input type="checkbox"/> Other (be specific) | | | |

Have you contacted the Office of Regulatory Staff (ORS)? * ☒ Yes ☐ No

Name of ORS Contact: Alice Sharpe + Chad Champion?

Concise Statement of Facts/Complaint: * (This section must be completed. Attach additional information to this page if necessary.)

I have been charged \$299 for the month of December. During that time I was not living at my house, because the heat wasn't working.

Relief Requested: * (This section must be completed. Attach additional information to this page if necessary.)

My request is to have the charges removed, and have a hearing before the Public Service Commission.

STATE OF SOUTH CAROLINA)

VERIFICATION

COUNTY OF Richland)

I, Doris Taylor

verify that I have read my complaint filed on 2/25/10

and know the contents thereof, and that said contents are true.

Doris Taylor
Complainant's Signature *

Internal Use Only

Processed By	Date
H.E.	